

Nebraska's Capital City

March 30, 2001

Mayor Wesely and City Council City of Lincoln City County Building Lincoln, NE

Mayor Wesely and Members of the City Council:

An investigation has been made regarding the application of Twisted Steele Inc. d.b.a. Lazzaris, 1434 'O' Street holders of a class J liquor license.

Twisted Steele Inc. has leased the business space, which was deleted by Iguana's Pub & Grill. The company wishes to include this area at 1430 'O' Street on the liquor license held by Lazzaris.

They also request an upgrade to the liquor license from a class J to a class C liquor license.

Background information on Matthew Vrzal, president of Twisted Steele Inc. will be omitted as the Council has approved Mr. Vrzal on the past application.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police

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STATE OF NEBRASKA

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Sct date: 4/2/01 PH: 4-16-01



Mike Johanns

Governor

March 27, 2001

Office of the City Clerk 555 So 10th Suite 103 Lincoln NE 68508 31677

Forrest D. Chapman
Executive Director
301 Centennial Mail South, 5th Floor
P.O. Box 95046
Lincoln, Nebraska 68509-5046
Phone (402) 471-2571
Fax (402) 471-2814
TRS USER 800 833-7352 (TTY)

NEBRASKA LIQUOR CONTROL COMMISSION

Dear Local Governing Body:

RE: Twisted Steele, Inc., Class C Application
Upgrading from Class J 26895 9 adding

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

 You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose NOT to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- 1) There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

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Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Licensing Division

Enclosures

Rhonda R. Flower Commissioner R.L. (Dick) Coyne Chairman **Bob Logsdon**Commissioner

An Equal Opportunity/Affirmative Action Employer

FORM 35-4001 REV: 12/99

Printed with soy ink on recycled paper

APPLICATION FOR LICENSE

Nebraska Liquor Control Commission PO Box 95046, 301 Centennial Mall South Lincoln, NE 68509-5046



INSTRUCTIONS: Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each

http://www.nol.org/home/\

Phone: (402) 471-2571 Fax: (402) 471-2814

RECEIVED

MAR -8 2001

NEBRASKA LIQUOR

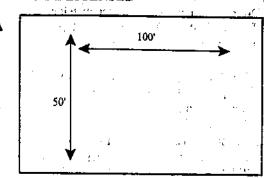
individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application, Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4. Commission checklist, form 4251

5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders holding over 25% stock 6. All applications must be typewritten or printed clearly 7. Submit in **Triplicate**

CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH 41.00 A Beer, On Sale Ohly - Inside Corporate Limits \$45.00 Collected at Local Level exempt F Beer, On Sale Only - Outside Corporate Limits \$45.00 Collected at Local Level. exempt ☐ B Beer, Off Sale Only - Inside/Outside Corporate Limits \$45,00 Collected at Local Level exempt ☐ J Wine, Beer, On Sale Only - Inside Corporate Limits \$45.00 Collected at Local Level exempt I Spirits, Wine, Beer, On Sale Only - Inside Corporate Limits \$45.00 : -Collected at Local Level exempt D Spirits, Wine, Beer, Off Sale Only - Inside Corporate Limits \$45.00 \$150.00 exempt C Spirits, Wine, Beer On & Off Sale- Inside Corporate Limits \$45.00 Collected at Local Level exempt M Bottle Club (Spirits, Wine, Beer, On Sale) \$45.00 Collected at Local Level exempt ☐ H Nonprofit Corporation \$45.00 Collected at Local Level: exempt K Wine Only, Off Sale \$45.00 Collected at Local Level exempt O Boat \$45.00 \$50.00 exempt O V Manufacturer of Beer, Wine & Distilled Spirits \$45.00 Varies \$100 to \$1,000 \$10,000 min. $\Box x$ Wholesale Liquor \$45.00 \$500.00 \$ 5,000 min. W Wholesale Beer \$45.00 \$250.00 \$ 5,000 min. ŨΥ Farm Winery \$45.00 \$250.00 \$ 1,000 min. O L Craft Brewery (Brew Pub) \$45.00 \$250.00 \$ 1,000 min. 1 Type of application being applied for Bond Company - for Classes L V W X Y only (place appropriate number in box) 1= Individual License requires Form 1 to be attached. 2⇒ Partnership License requires Form 2 to be attached. Start Date Month/Day/Year **Bond Number** 3= Córporate License requires Form 3 and 4 and Manager Application be attached. CONTRACTOR STATE Trade Name (name of business) Telephone Number at premise to be licensed NAME PENDING LAZZALI S 402-475-5556 1) Street Address of Proposed licensed premise 2) Mailing Address for receipt of Liquor Control Commission mailings Zip Code City County Zip Code INCOLN ..68508 LINCOLN LAWCHS TER LAWCETTEL

DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bldg, is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.



Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement approximately 30' x 50' at the East end.

MME PENDING

- main & bot 24x9 W/ hallway 4'x 54' basement 18'x 45'

Main floor 23 x 140

1461

making Leense premise real: Main Sloor 46' x 140'-w/ pasement excluding Garage area 21 X 18' to the W

4 1. READ CAREFULLY. Answer completely and accurately. Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Cruninal charge means any charge alleging a felony or misdemeanor violation of a federal of state law; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

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2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).	LEASING
3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.	X
4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.	X SYRACUSE 15 LAROUNG 320 513 51 SYRACUSE NE 6844
5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? •• If yes, explain.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.	*
7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?	X 2.097-00
Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged of indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.	
Is anyone listed on this application a law enforcement officer? If yes, ist the person, the law enforcement agency involved and the persons exact luties.	The figure course of the second of the secon
0. List the primary bank and/or financial institution (branch if applicable) o be utilized by the prisiness and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.	CITY BANK AND TRUST 2929 PINE LAKE RD
List all past and present liquor licenses held by any person named in his application. Include license holder name, location of license and icense number. Also list reasons for termination of any licenses reviously held.	THE BAR 1644 PST THE SIDEMANAL 935 0° ST LAZZMEIS 1434 0° ST
2. List the person who will be the on site supervisor of the business and ne estimated number of hours per week such person or manager will be on the premises supervising operations.	MANT JEZAZ,
3. List the training and experience of the person listed in #11 above in onnection with selling and/or serving alcohol products.	. LIQUOR ELANACISE CLASS
If the property for which this license is sought is owned, submit a copy the deed, or proof of ownership, if leased submit a copy of the lease overing the entire license year. (Documents must show title or lease held terest in name of applicant as owner or lessee in the individual(s) or reporate name for which the application is being filed)	
. When do you intend to open for business?	AS Soon AS POSSIBLE.

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Corporation Application for License - Form 3 and 4 RECEIVED Nebraska Liquor Control Commission **INSTRUCTIONS:** 1) Application and application for manager must be typewritten and submitted in triplicate. 2) Fingerprint cards (2 cards per person) must be submitted for each stockhall evening over 25% FEB 23 2001 stock, chief executive officer, manager and all spouses. 3) Information regarding spouses must be completed; indicate if NOT mayried or, spouse may provide an affidavit of NO interest if they have no interest at all, directly or indicate in the complete of NO interest if they have no interest at all, directly or indicate in the complete of NO interest if they have no interest at all, directly or indicate in the complete of the complete of NOT mayried or, spouse may provide an affidavit of NO interest if they have no interest at all, directly or indicate in the complete of the **NEBRASKA LIQUOR** 3) Information regarding spouses must be completed, including an affidavit of NO interest if they have no interest at all, directly or indicated COMMISSION **CONTROL COMMISSION** Is this corporation organized under the laws of Nebraska, not for profit, exempted from the payment of Federal Income Taxes as provided by ☐ YES X NO If yes, a certified copy of letter of exemption from the Section (501)(c)(4), (7) or (8) Internal Revenue Code of 1954. Internal Revenue Service shall be attached to this application recognizing the exempt status of the corporation. Name of Corporation That Will Hold License. Attach copy of State of Nebraska Registration. Total Number of Shares. Attach Copies of Stock Certificates. WISTED STEELE /NC. Corporate Street Address (1) Corporate Street Address (2) Corporate Telephone Number 402-474-6592 County State Zip Code NE 68508 LINCOLN, NE LAWCASTER Name of Resident Agent Name of Manager IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER

Title

Zip Code

68508

Home Address(2)

State

NE

PRESIDENT

Name

City

Home Address (1)

L/WCOLN

Social Security Number

State

Business Telephone Number

402-474-6592

NE

Date of Birth

Driver's License Number

Home Telephone Number

Corporation Application for License - Form 3 and 4

PRINCIPL	E OFFICERS, DIREC	TORS, STOCKHOLDE	rs and spouses		* * *
Name of Officers, Directors, Spouses and Address. Give I. Name, Middle, Maiden, and any aliases		ocial Security Number	Date of Birth	Title	Number of Shares
OFFICER'S NAME VRZAZ, MATTHE	W, STRAND		5 0	PRESIDENT	33%
Spouse's Name					
OFFICER'S NAME GRUMMERT, No	EAL,			VICE PLESIOR	33
Spouse's Name					
OFFICER'S NAME REZAC, DAWA,	7			SECRETARY	33
Spouse's Name REZAC, LISA	3				
OFFICER'S NAME				· · · · · · · · · · · · · · · · · · ·	
Spouse's Name					
OFFICER'S NAME		- "			
Spouse's Name					
OFFICER'S NAME					
Spouse's Name					

(If Necessary, Continue on Separate Sheet)

Is this Corporation controlled by another Corporation? YES NO	If YES, LIST EACH SHAREHOLDER OWNING MORE THAN 25% stock in that corporation. Any applicant who has a Corporation as a shareholder MUST file an organizational chart listing all shareholders and/or approximate and the shareholders and the corporation and the shareholders and the corporation and the shareholders and the corporation are corporated as a shareholder of the corporation and the corporation are corporated as a shareholder of the corporation and the corporation are corporated as a shareholder of the corporation and the corporation are corporated as a shareholder of the corporation and the corporation are corporated as a shareholder of the corporation and the corporation are corporated as a corporated
Name of Control Corporation	file an organizational chart listing all shareholders and/or corporations owning more than 25% stock. (If needed use separate sheet)
Please indicate below your corporate tax year with the IRS.	
Starting Date: Ending Date:	
Are any of the stockholders, officers, directors, or spouses ineligible personal	lly to receive a license? □ YES □ NO
If YES, list the names of such persons and the reason(s) they are ineligible. U	Jse Separate Sheet (If Applicable)
POWER	OFATTORNEY
of the State of Nebraska, with its registered corporate office in LINC	a corporation organized and doing business under the law. County, Nebraska, does hereby nominate Linicoun e corporation before the Nebraska Liquor Control Commission, as required, specified
STATE OF NEBRASKA,) (an (a) fer County) ss.	
Notas Publis Signatura & Scale of Nebraska	By PRESIDENT
TERRE LEE COWAN My Comm. Exp. Jan. 9, 2005	SECRETARY

In Compliance with ADA, this form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format

Application for Corporate Manager *Must Be A Neb Aka-Resoluti* Please submit in Triplicate FEB 23 2001

	LIQUOR I	ICENSE I	NFORMAT	TION			
NAME OF LICENSED CORPORATION			·	CLAS	S & LICE	NSE NUME	BER
TWISTED STEELE 1.	WC.				\subset		
TRADE NAME OF LICENSED PREMISE			•				
NAME PENDING/LA	1221ne	\$					
STREET ADDRESS OF LICENSED PREMISE	CITY		co	UNTY			ZIP CODE
1432 0' ST-14340'	st Lin	COZW		LAN COP	51E12		68508
On behalf of the corporation, I designate this individ	ual as corpora	te manager.					
Signature of Corporate President/CEO:	Man	Veruz					
APPLICAN	r inform	MATION	(MUST I	BE 21 OR	OVER)	
NAME (LAST, FIRST, MIDDLE, MAIDEN)	SEX		SECURITY	NUMBER	DATE	OF BIRTH	PLACE OF BIRTH
VRZAZ MATTHEW, STRAMO	. F (M)	5			-		Gemo /signo, ru
HOME STREET ADDRESS		CITY	<u></u>	COUNTY		STATE	ZIP CODE
1644 P ST		LINCEZ	N	LANC	ASTER	NE	68508
HOME TELEPHONE NUMBER (402) 770 — S/ 24	1	TELEPHONI 14 – 65°			DRIVE	RS LICENS	E NUMBER & STATE
SPOUSE'S INI	ORMAT	ION (IF N	OT MAI	RRIED IN	(DICA	ΓΕ)	
FULL NAME (LAST, FIRST, MIDDLE, MAIDEN)		so	CIAL SECU	IRITY NUME	BER	DRIVERS & STATE	LICENSE NUMBER
DATE OF BIRTH:		PL	ACE OF BIF	RTH:			
1. READ CAREFULLY - ANSWER FULL ever been convicted of or pled guilty to any crir or local law or ordinance. List the nature of the plea. Also list any pending charges at this time	ninal charge's charge, whe	? Criminal c	harge mean	ns any charge	alleging	a violation	of a Federal, State

3. Have you or your spouse ever made a compromise settlement for violation of such laws?

₹NO

□YES

Nebraska Li	iquor Contr	er, have all the qualifications rol Act (§53-131.01)	required	by алу р	erson en	titled to hold a Nebraska Liquor	Licer	nse?	
MYES	□ио		···	· · · · ·					
5. Have you	filed finge	rprint cards and PROPER I	FEES (if	check, m	ake out t	o the NE State Patrol), with this	appli	ication?	
□YES	MNO		ON	FIL	E_				
·		RESIDENCES SINCE A	AGE 18,	APPLIC	ANT A	ND SPOUSE MUST COMPLI	ETE		
APPLICANT	: CITY & STA	ATE	ΥE	AR	SPOUSE	E: CITY & STATE		YE	AR
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1744	1 5. C	OTHER, BUD I	1995	/917	ļ				
3751	FAL	WER DRIE	1997	1948					
134	N 91	B LINCOLN, NE	1998	1994					
1723			1949	2000					
1644	P 21	LINCON, NE EMPLO	Zogo YERS -	LIST L	AST TW	O EMPLOYERS		·	
YEA FROM	AR TO	NAME OF EMPLOYER				NAME OF SUPERVISOR	TEI	LEPHONE NUM	MBER
)999	2000	D+D DISTR	BUTT	n 67		GIL Gapsmint	4	167-35	73
1978	1999	THE BLASS				Jonny Monson	4	174-654	72
PE	RSONAL	OATH AND CONSENT O)F INVE	STIGAT	TION - N	MUST BE SIGNED BY APPL	ICAP	NT & SPOU	SE
application, the	OF viduat(s), bein at said applica) SS) In g first duly sworn upon oath, deposation has been read and that the co	ntents there	of and all s	tatements	is the applicant and/or spouse of applica contained therein are true. If any false y law. (Sec. §53-131.01) Nebraska Liq	stateme	ent is made in a	e and foregoin any part of thi
The undersigne and Federal), a Liquor Control	ed applicant he nd bank or lend Commission	creby consents to an investigation of ding institution records, and said app	his/her bac licant and s or releasir	kground incopouse waive	luding all r any rights mation to	ecords of every kind and description incl or causes of action that said applicant or the Nebraska Liquor Control Commissi	luding p	police records, ta e may have again	ist the Nebrask
The undersigne herein is incom			ued, based	on the infor	mation sub	mitted in this application, is subject to ca	ıncellat	tion if the inform	nation contained
	•	Jamanure of Applicant				Signature of Spouse (if	applic	able)	
	FEB	and sworn to before me this 23				bed in my presence and swom to before			<u>-</u>
	·	A NETRICADA STREBIASKA TERRE LEE COWAN My Comm. Exp. Jan. 9, 2005				Notary Sign:	ature é	& Seal	